## PART B - FEE(S) TRANSMITTAL

Complete and	send this form	, together with	applicable	fee(s), t	o: <u>M</u> a
AR O & 2005 -				, ,	- 7

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

			or Fa	Alexandria, Vir x (703) 746-4000	B			
INSTRUCIONS: This for	ociow of directed officiwise	smitting the ISSU Patent, advance on in Block 1, by (a	E FEE and PU	BLICATION FEE (if requation of maintenance fees	uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sepa	hould be completed who correspondence address arate "FEE ADDRESS"		
CURRENT CORRESPONDENCE	DE ADDRESS (Note: Use Block 1 for	any change of address)	Note: A certificate of mailing can only be used for domestic mailings of t Fee(s) Transmittal. This certificate cannot be used for any other accompanyi papers. Each additional paper, such as an assignment or formal drawing, mu have its own certificate of mailing or transmission.					
OLIFF & BERRI P.O. BOX 19928 ALEXANDRIA, V	'A 22320	•		I hereby certify that to States Postal Service addressed to the Matransmitted to the US	ertificate of Mailing or Trans his Fee(s) Transmittal is bein with sufficient postage for fir ill Stop ISSUE FEE address PTO (703) 746-4000, on the co	smission g deposited with the Uni st class mail in an envelo above, or being facsim late indicated below.		
1/2005 MBEYENE2 000001	129 10636734					(Depositor's nan		
2:1501 2:1504	1400.00 OP 300.00 OP					(Signatu		
APPLICATION NO.	FILING DATE	FIRST NAMED IN		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/656,734	09/08/2003		Shinichi M	· · · · · · · · · · · · · · · · · · ·	116488	4745		
APPLN. TYPE	SMALL ENTITY NO	ISSUE FI	400	PUBLICATION FEE \$300	TOTAL FEE(S) DUE	03/08/2005		
EXAM	IINER	ART UNIT		CLASS-SUBC LASS	]			
DOLINAR,	ANDREW M	3747		123-179300		•		
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			or agents OR  (2) the name registered att 2 registered	1) the names of up to 3 registered patent attorneys r agents OR, alternatively,  2) the name of a single firm (having as a member a egistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is sted, no name will be printed.				
		E PRINTED ON T		• • •	nee is identified below the d	logument has been filed		
PLEASE NOTE: Unless	an assignee is identified be a7 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear	r on the patent. If an assignent,	nee is identified below, the d	ocument has been med		
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	an assignee is identified be 37 CFR 3.11. Completion	of this form is NO	I a substitute for	r on the patent. If an assignifiling an assignment.  (CITY and STATE OR CC		ocument has been med		
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	an assignee is identified be 37 CFR 3.11. Completion	of this form is NOT	I a substitute for	r filing an assignment. (CITY and STATE OR CC		ocument has been med		
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN TOYOTA JIDOSF	an assignee is identified be 137 CFR 3.11. Completion EE IA KABUSHIKI KA	of this form is NOT	T a substitute for RESIDENCE: Toyota,	filing an assignment. (CITY and STATE OR CO				
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN TOYOTA JIDOSF Please check the appropriate 4a. The following fee(s) are	an assignee is identified be 137 CFR 3.11. Completion EE  IA KABUSHIKI KA  c assignee category or category	of this form is NOI (B ISHA ries (will not be pri	RESIDENCE: Toyota, inted on the pate	(CITY and STATE OR CO Japan ent): Individual (3) (e(s):	OUNTRY)  Corporation or other private gr	oup entity Governm		
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN TOYOTA JIDOSF Please check the appropriate 4a. The following fee(s) are Issue Fee	an assignee is identified be 37 CFR 3.11. Completion EE HA KABUSHIKI KA c assignee category or category enclosed:	of this form is NOI (B ISHA ries (will not be pri	Ta substitute for RESIDENCE: Toyota, inted on the pate Description of Fee A check in t	(CITY and STATE OR CO Japan  ent): Individual (S) (e(s): the amount of the fee(s) is e	Corporation or other private grandlesed. Ck# 164224	oup entity Governm		
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN TOYOTA JIDOSF Please check the appropriate 4a. The following fee(s) are Issue Fee	an assignee is identified be 37 CFR 3.11. Completion EE  HA KABUSHIKI KA  c assignee category or categor enclosed:  mall entity discount permittee	of this form is NOI (B ISHA ries (will not be pri	Ta substitute for Payment by RESIDENCE:  Toyota,  inted on the pate  Payment of Fer  A check in t  Payment by	(CITY and STATE OR CO Japan  ent): Individual (S) (e(s): the amount of the fee(s) is e	Corporation or other private grandlessed. Ck# 164224 is attached.	oup entity Governm		
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN TOYOTA JIDOSF  Please check the appropriate  4a. The following fee(s) are  Issue Fee  Publication Fee (No s Advance Order - # of	an assignee is identified be 37 CFR 3.11. Completion EE  HA KABUSHIKI KA  c assignee category or categorenclosed:  mall entity discount permitter f Copies	(B.ISHA ries (will not be prided)	Ta substitute for Payment by Payment by Payment by The Director Deposit Accounts	(CITY and STATE OR CO Japan  ent): Individual (S) (e(s): the amount of the fee(s) is e credit card. Form PTO-203 or is hereby authorized by nt Number 15-0461	Corporation or other private granclosed. Ck# 164224 8 is attached. charge the required fee(s), or enclose an extra contraction.	oup entity Governm  (\$1700)  credit any overpayment opy of this form).		
PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN TOYOTA JIDOSF  Please check the appropriate  4a. The following fee(s) are  Issue Fee  Publication Fee (No s Advance Order - # of  5: Change in Entity Status  a. Applicant claims S	an assignee is identified by 37 CFR 3.11. Completion EE  HA KABUSHIKI KA  c assignee category or categorenclosed:  mall entity discount permitter f Copies	(B.ISHA  ries (will not be pri 4b  ed)  37 CFR 1.27.	Ta substitute for Payment of Fed A check in the Payment by The Director Deposit Account	(CITY and STATE OR CO Japan  ent): Individual (State of Color)  ent): Individual (State of Color)  e(s):  the amount of the fee(s) is e credit card. Form PTO-203  or is hereby authorized by  nt Number 15-0461  t is no longer claiming SMA	Corporation or other private grandlessed. Ck# 164224 is attached.	oup entity Governm  (\$1700)  credit any overpayment opy of this form).		
PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN TOYOTA JIDOSF  Please check the appropriate  4a. The following fee(s) are  Issue Fee  Publication Fee (No s Advance Order - # of  5: Change in Entity Status  a. Applicant claims S	an assignee is identified by 37 CFR 3.11. Completion EE  HA KABUSHIKI KA  c assignee category or categorenclosed:  mall entity discount permitter f Copies	(B.ISHA  ries (will not be pri 4b  ed)  37 CFR 1.27.	Ta substitute for Payment of Fed A check in the Payment by The Director Deposit Account	chiling an assignment.  (CITY and STATE OR CO  Japan  ent): Individual (S)  (e(s):  the amount of the fee(s) is e  credit card. Form PTO-203  or is hereby authorized by  nt Number	Corporation or other private granclosed. Ck# 164224 18 is attached.  Charge the required fee(s), or enclose an extra contact.	oup entity Governm  (\$1700)  credit any overpayment opy of this form).		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.